

State of Washington

FEEDADE fee \$10,00

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Date 14Aprilo

Application for a Water Right
Please follow the attached instructions to avoid unnecessary delays.

Section 1. APPLICANT - PERSON, ORGA	NIZATION, OR WATER SYSTEM
Name STEVEN S, STECKER	Home Tel: (360) 805 - 6207
Mailing Address Po 30k 5000 -111	
City Duvice State WA Zip+49810	FAX:()
Section 2. CONTACT - PERSON TO CAL Same as above	L ABOUT THE APPLICATION
Name	Home Tel:(
Mailing Address	Work Tel:()
CityStateZip+4	+FAX:()
Relationship to applicant	
Section 3. STATEMENT OF INTENT	
The applicant requests a permit to use not more than cubic feet per second) from a surface water source or free	ground water source (check only one) for the purpose(s) Live Stock / FVS ATTACHA "LEGAL" etions.) NOTE: A tax parcel number or a plat number is not FIRM PROMOTE
	oject. Indicate the period of time that the water will be needed:
From/ to/	
Section 4. WATER SOURCE	
If SURFACE WATER	IFGROUNDWATER
Name the water source and indicate if stream, spring, lake, etc. If unnamed, write "unnamed spring," "unnamed stream," etc.:	A permit is desired for well(s).
Number of diversions:	
Source flows into (name of body of water):	Size & depth of well(s): 4 " 320 FT Deat
LOCATION	
section corner:	FOET NORTH OF CONTER OF 556. 31
/ 1/4 of Section Township Range(E/W	If location of source is platted, complete below: Lot Block Subdivision
SE NW 31 27 76	SNOHOMISH
For Ecology Use Date Received: Price SEPA Exempt Not Exempt FERC License #	Part Of Health #
	Dept. Of Health # The Returned 4/14/04 By WRIA: 7

Appl. No.6 | - 28207

Sec	tion 5. GENERAL WATER SYSTEM INFORMATION
A.	Name of system, if named: RAVNY RIDGE WATER CO.
	Briefly describe your proposed water system. (See instructions.) THE WELL IS DEET 320' 4"DIA PRESSURE TANK POUR CAURD IN 200 IT FREDS MY HOME - I WATER LIVESTOCK AND CARDENS. I HAVE A FISH POND THAT NEXDS WATER IN SUMMER (TROIT) HAVE 4 COCDESH FONDS THAT NEXD WATER YEAR ROUND, HAVE 4 COCDESH FONDS THAT NEXD WATER YEAR ROUND, HAVE 4 COCDESH FONDS THAT NEXD WATER YEAR ROUND, HAVE 4 COCDESH FONDS THAT NEXD WATER YEAR ROUND, HAVE HAVE 4 COCDESH FONDS THAT NOW D WATER YEAR ROUND, HAVE A COCDESH FONDS THAT NOW D WATER YEAR ROUND, HAVE WELL ALSO WILL CONNECT TO A FUTURE HONE AND
C.	Do you already have any water rights or claims associated with this property of YES INO PROVIDE DOCUMENTATION. GROUND WHEN FOR DOMESTIC LICE STOCK TIRE GATION - FISH 1780
	ction 6. DOMESTIC / PUBLIC WATER SUPPLY SYSTEM INFORMATION ompleted for all domestic/public supply uses.)
A. B.	Number of "connections" requested: Type of connection (Homes, Apartment, Recreational etc.) Are you within the area of an approved water system? If yes, explain why you are unable to connect to the system. Note: Regional water systems are identified by your County Health Department.
Com	plete C. and D. only if the proposed water system will have fifteen or more connections.
C.	Do you have a current water system plan approved by the Washington State Department of Health? If yes, when was it approved? Please attach the current approved version of your plan.
D.	Do you have an approved conservation plan? If yes, when was it approved? Please attach the current approved version of your plan.
100000000000000000000000000000000000000	ction 7. IRRIGATION/AGRICULTURAL/FARM INFORMATION Omplete for all irrigation and agriculture uses.)
A.	Total number of acres to be irrigated:
В.	Use TREE FARM PASTURE Acres 10 Use TREE FORM Acres 10 Use TREE FORM Acres 4 Use Domestic Acres 4
C.	Total number of acres to be covered by this application:
D.	Family Farm Act (Initiative Measure Number 59, November 3, 1977) Add up the acreage in which you have a controlling interest, including only: ‡ Acreage irrigated under water rights acquired after December 8, 1977; ‡ Acreage proposed to be irrigated under this application; ‡ Acreage proposed to be irrigated under other pending application(s).
	 Is the combined acreage greater than 6000 acres? Do you have a controlling interest in a Family Farm Development Permit? If yes, enter permit no:
E.	Farm uses: Stockwater - Total # of animals 20 Animal type 4 ans / Flos (If dairy cattle, see below) Dairy - # Milking # Non-milking # Non-milk
	FISH PROPAGATION - 5000 TROIT CAUCKERS 100 SOOD COLD FISH TURKETS 500 PROPASANT 1000 APPLICATION QUARK 1000
	APPLICATION PUCKS LEE DVID TO O

Will you be using a dam, dike, or other structure to retain or store water?	□ YES NO
NOTE: If you will be storing 10 acre-feet or more of water and/or if the water desome portion of the storage will be above grade, you must also apply for a reser-application from the Department of Ecology.	
Section 9. DRIVING DIRECTIONS	
Provide detailed driving instructions to the project site. FOLLOW SR 203 SOUTH OF MONROE SMOLDS GO CEFT UP C V ROAD TO THIRD DRIVE OF GOLOW ASPARET ROAD TYCK IT TURNS TO COLOR ASPARET ROAD TYCK IT TURNS TO COLOR TO PUNE REST LEFT TO HOUSE/2-D LEFT TO PUNE	TO CHERRY VALLEY ROAD" N RIGHT. RANGE HOUSE
Section 10. REQUIRED MAP	
A. Attach a map of the project. (See instructions.)	
Section 11. PROPERTY OWNERSHIP	
A. Does the applicant own the land on which the water will be used If no, explain the applicant's interest in the place of use and prove	
B. Does the applicant own the land on which the water source is loc If no, submit a copy of agreement:	eated? YES□NO
I certify that the information above is true and accurate to the best of to process my application, I grant staff from the Department of Ecolomonitoring purposes. Even though I may have been assisted in the pemployees of the Department of Ecology, all responsibility for the acceptance of the Department of Ecology, all responsibility for the acceptance of the Department of Ecology.	ogy access to the site for inspection and reparation of the above application by the
Landowner for place of use (if same as applicant, write "same")	Date
	계 시장에 그는 그들은 병으로 젊으라 살이다.

Section 8. WATER STORAGE

We are returning your application for the following r	eason(s):	
Examination fee was not enclosed		APPLICANT PLEASE RETURN TO CASHIER, PO BOX 5128, LACEY, WA 98509-5128
Section number(s)ncomplete	is/are	APPLICANT PLEASE RETURN TO THE APPROPRIATE REGIONAL OFFICE
Explanation:		
Please provide the additional information requested (de	above and return your a	pplication by

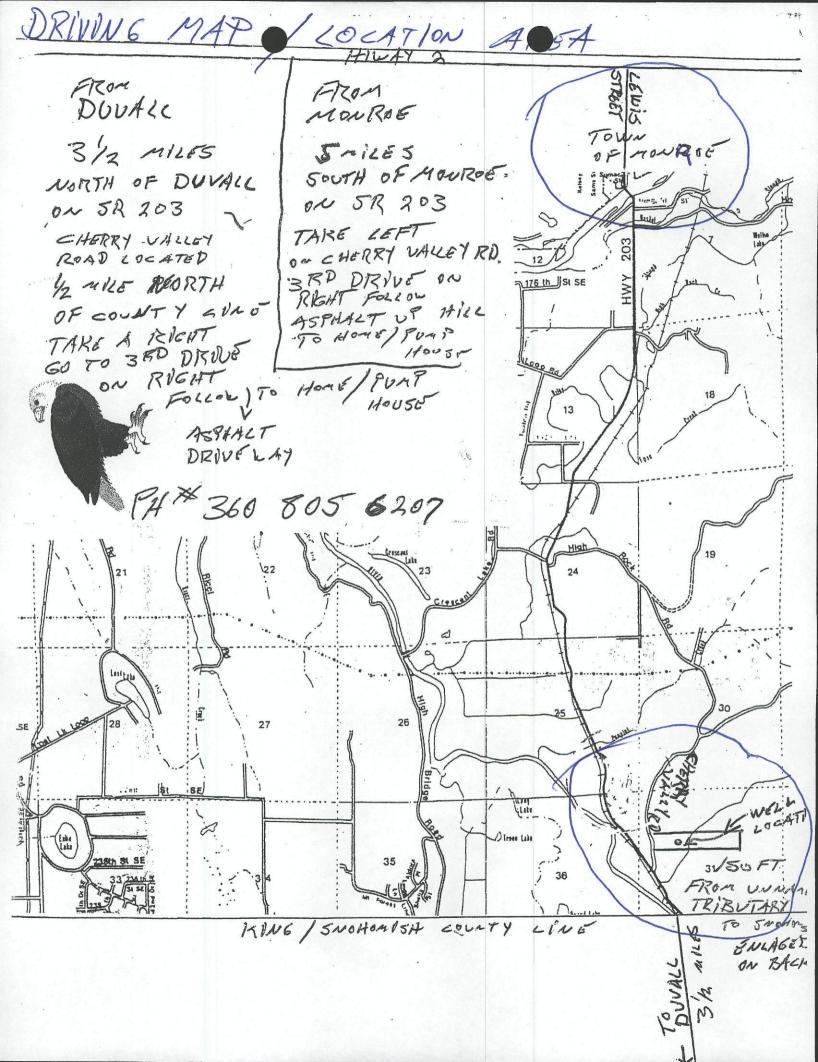
Ecology is an Equal Opportunity employer. To receive this document in alternative format, contact the Water Resources Program at (360) 407-6604 (Voice) or (360) 407-6006 (TDD).

APPLICATION

Use this page to continue your answers to any questions on the application. Please indicate section

number before answer.

DRIVEING MAP/COCATION

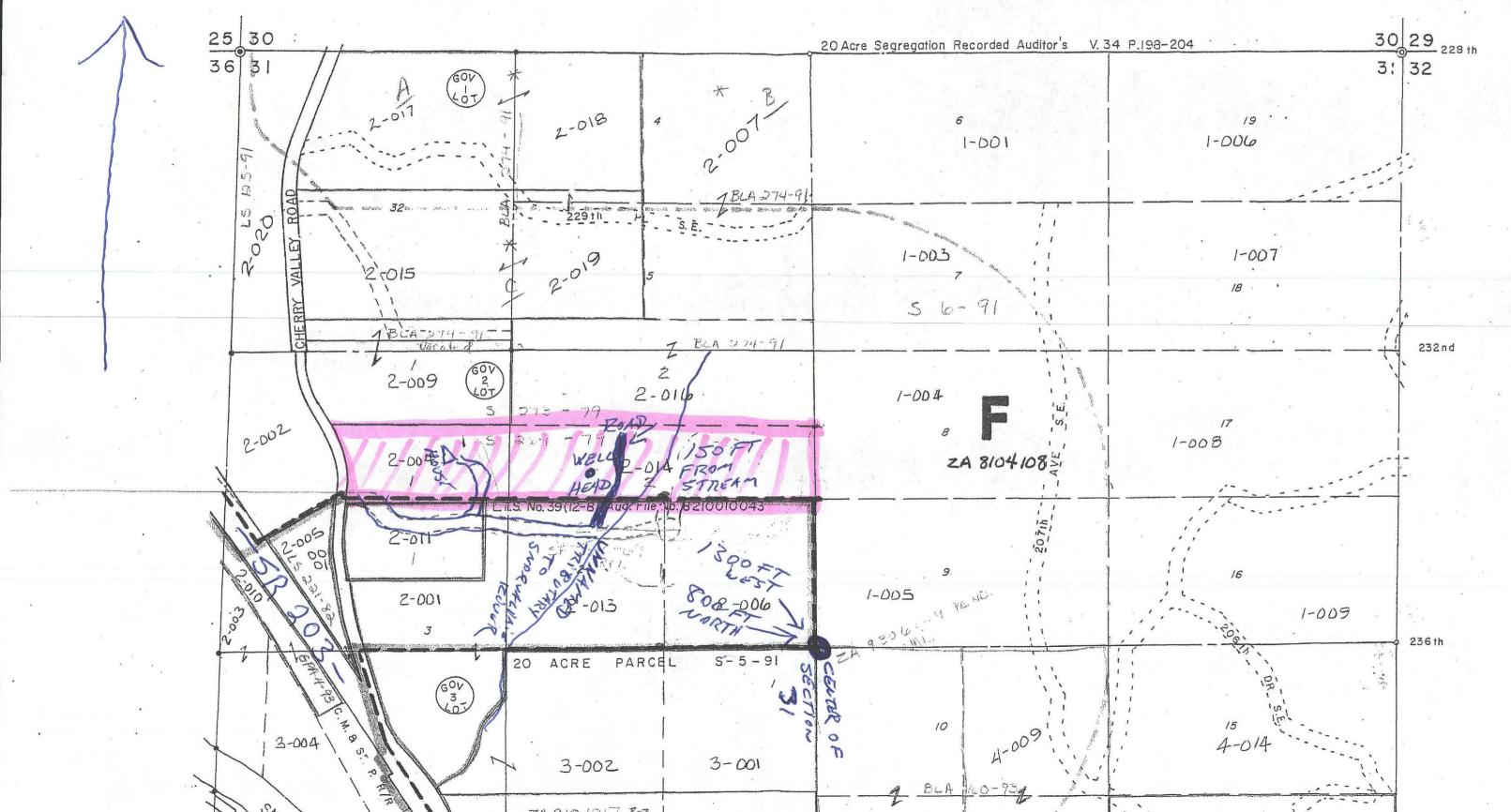


WLARGED MAP OF PROPERTY

WHICH HEAD 150 FT WEST OF STREAM COMMAND TO

RIVER

PHOUSE ADTROUT TO WEST



NOKIM